

Application Data Sheet

Application Information

Filing Date::	12/01/2003
Application Type::	Continuation
Subject Matter::	Utility
Suggested Group Art Unit::	None
CD-ROM or CD-R?::	None
Title::	CYTOLOGICAL IMAGING SYSTEM AND METHOD
Attorney Docket Number::	2024738-7030163001 (11.015012)
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figures::	19
Total Drawing Sheets::	18
Small Entity::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity

Given Name:: David J.
Family Name:: Zahniser
City of Residence:: Wellesley
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 33 Sheridian Road
City of mailing address:: Wellesley
Country of mailing address:: US
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02481
Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Matthew S.
Family Name:: Zelinski
City of Residence:: Worthington
State or Province of Residence:: OH
Country of Residence:: US
Street of mailing address:: 446 Colonial Avenue
City of mailing address:: Worthington
Country of mailing address:: US
State or Province of mailing address:: OH
Postal or Zip Code of mailing address:: 43085

Applicant Authority type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Thomas M.
Family Name::	Dolash
City of Residence::	Worthington
State or Province of Residence::	OH
Country of Residence::	US
Street of mailing address::	845 Middlebury Drive
City of mailing address::	Worthington
Country of mailing address::	US
State or Province of mailing address::	OH
Postal or Zip Code of mailing address::	43085
Applicant Authority type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Garrick L.
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State or Province of Residence::	OH
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Given Name:: Mark

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Given Name:: John S.

Family Name:: Laudo

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Representative Information

Representative Customer Number:: 23639

Representative Designation::	Registration Number::	Name::
Primary	37,104	David T. Burse

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/430,117	10/29/1999

Assignee Information

Name::

Cytac Corporation

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